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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION		Attorney Docke	t Number	45930.5.1
		First Named Inv	entor	Alexander A. KHROMYKH
		COMPLETE IF KNOWN		
	TR 1.63)  Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	Application Num	ber	
☐ Declaration Submitted OR with Initial Filing		Filing Date		
		Art Unit		
		Examiner Name		
	required)	1		
I hereby declare that:				
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.				
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:				
FLAVIVIRUS REPLICON PACKAGING SYSTEM				
the specification of which (Title of the Invention)				
the specification of which  (Title of the Invention)  is attached hereto				
OR				
was filed on (MM/DD/YYYY) 06/07/2004 as United States Application Number or PCT International				
Application Number PCT/AU2004/000752 and was amended on (MM/DD/YYYY) (if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part				
applications, material information which became available between the filing date of the prior application and the national or PCT international				
filing date of the continuation-in-part application.  I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent, inventor's or plant				
breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States				
of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority No Claimed	ot Certified Copy Attached? Yes No
PCT/AU2004/000752	WO	06/07/2004		
2003902842	AU	06/06/2003		
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:				
[Page 1 of 2]				

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information ois required to obtain or retain a benefity by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, ad submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, A 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## **DECLARATION – UTILITY OR DESIGN PATENT APPLICATION** Direct all correspondence to: 022859 OR Correspondence address **⊠** Customer Number below Name FREDRIKSON & BYRON, P.A. **Address** 200 South Sixth Street, Suite 4000 City State ZIP Minneapolis Minnesota 55402 Country Telephone Fax **USA** (612) 492-7000 (612) 492-7077 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued Name of Sole or First Inventor: A petition has been filed for this unsigned inventor **Family Name** Given name (first and middle [if any]) or Surname Alexander A. **KHROMYKH** Inventor's Date Signature 23.01.06 Residence: City Citizenship State Country The Gap Queensland Australia Australia **Mailing Address** 12 Devonhill Street City State ZIP Country The Gap 4061 Queensland Australia NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) or Surname Inventor's Date Signature Residence: City State **Country** Citizenship **Mailing Address** City State ZIP Country Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.